

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Tom Torlakson for State Superintendent of Public Instruction 2010			Date of This Filing <u>10/06/2010</u>	Date Stamp Page 1 of 8	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916)-34-8-9100	I.D. NUMBER (if applicable) 1282317		Report No. <u>10062010-2</u>		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95841	No. of Pages <u>8</u>		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3153	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$142.84
10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3154	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$70.41
10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3155	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$14.19

*Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

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AREA CODE/PHONE NUMBER (916)-34-8-9100	I.D. NUMBER (if applicable) 1282317		Report No. _____ 10062010-2		
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10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3156	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$218.45
10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3157	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2.89
10/04/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3158	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$11.09

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10/05/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3159	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$112.17
10/05/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$56.48
10/05/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3161	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$35.23

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AREA CODE/PHONE NUMBER (916)-34-8-9100	I.D. NUMBER (if applicable) 1282317	Report No. <u>10062010-2</u> <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> No. of Pages <u>8</u>			
STREET ADDRESS					
CITY Sacramento	STATE CA		ZIP CODE 95841		

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10/05/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3162	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$22.83
10/05/2010	California Democratic Party Sacramento, CA 95811 ID# 741666 Memo Reference: NON:S497:3163	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5.02
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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OTH - Other	

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STREET ADDRESS					
CITY Sacramento	STATE CA	ZIP CODE 95841			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

Memo Reference: NON:S497:3163
In-kind

Memo Reference: NON:S497:3162
In-kind

Memo Reference: NON:S497:3161
In-kind

Memo Reference: NON:S497:3160
In-kind

Memo Reference: NON:S497:3159
In-kind

Memo Reference: NON:S497:3158
In-kind

Memo Reference: NON:S497:3157
In-kind

Memo Reference: NON:S497:3156
In-kind

Memo Reference: NON:S497:3155
In-kind

Memo Reference: NON:S497:3154
In-kind

Memo Reference: NON:S497:3153
In-kind
